

10/510135

DT04 Rec'd PCT/PTO 0 4 OCT 2004

Application Data Sheet

Application Information

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| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | None |
| Computer Readable Form (CRF):: | No |
| Number of copies of CRF:: | 0 |
| Title:: | VESSEL WITH DEEP WATER TRANSFER SYSTEM |
| Attorney Docket Number:: | 2001-1353 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 6 |
| Small Entity?:: | No |
| Latin Name:: | |
| Variety Denomination Name:: | |
| Petition Included?:: | No |
| Petition Type:: | |
| Licensed US Gov't Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent Appl.?:: | No |

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Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: THE NETHERLANDS
Status:: Full Capacity
Given Name:: HANS
Middle Name::
Family Name:: PEEREBOOM
Name Suffix::
City of Residence:: MONACO
State or Province of
Residence::
Country of Residence:: MONACO
Street of Mailing 49 AVENUE HECTOR OTTO
Address::
City of Mailing Address:: MONACO
State or Province of Mailing Address::
Country of Mailing Address:: MONACO
Postal or Zip Code of Mailing Address:: MC-98000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: THE NETHERLANDS
Status:: Full Capacity
Given Name:: LEENDERT
Middle Name::
Family Name:: POLDERVAART
Name Suffix::
City of Residence:: LA TURBIE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 92, LES HAUTES DE MONTE CARLO
Address::
City of Mailing Address:: LA TURBIE

State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: FR-06320

Applicant Authority Type:: Inventor
Primary Citizenship Country:: THE NETHERLANDS
Status:: Full Capacity
Given Name:: HEIN
Middle Name::
Family Name:: WILLE
Name Suffix::
City of Residence:: EZE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 9 RUE MONTE ST. MICHEL
City of Mailing Address:: EZE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: FR-06360

Correspondence Information

Correspondence Customer Number:: 000466

Representative Information

| | |
|----------------------------------|--------|
| Representative Customer Number:: | 000466 |
|----------------------------------|--------|

Domestic Priority Information

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|------------------|----------------------|-------------------------|-------------------------|
| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This application | National Stage of | PCT/EP03/03524 | 4/3/03 |
| | | | |

Foreign Priority Information

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|-----------|-------------------------|---------------|-----------------------|
| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
| EUROPE | 02076321.5 | 4/3/02 | Yes |
| | | | |

Assignment Information

Assignee Name::
 Street of Mailing
 Address::
 City of Mailing Address::
 State or Province of Mailing Address::
 Country of Mailing Address::
 Postal or Zip Code of Mailing Address::